

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Attorney Docket No. 8734.232.00/US		
Application Number: 10/664,912		Filed: September 22, 2003		
For: DATA DRIVING APPARATUS AND METHOD FOR LIQUID CRYSTAL DISPLAY				
Art Unit: 2629	Examiner: Tammy T. PHAM			
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.				
The requested extension and fee are as follows (check time period desired and enter appropriate fee below):				
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	Fee \$130 \$490 \$1110 \$1730 \$2350	Small Entity Fee \$65 \$245 \$555 \$865 \$1175	\$ 130 \$ _____ \$ _____ \$ _____ \$ _____	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees, which may be required, or credit any overpayment, to Deposit Account No. <u>50-0911</u> .				
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>53,005</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____				
<u>/Valerie P. Hayes/</u> Signature		<u>August 1, 2011</u> Date		
<u>Valerie P. Hayes</u> Typed or printed name		<u>(202) 496-7500</u> Telephone Number		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below				
<input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.				